



**Water Resources Program**  
**Application for a Water Right Permit**

☐ SURFACE WATER ☒ GROUND WATER ☒ PERMANENT

☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

*Follow the attached instructions. Attach additional sheets as necessary.*

**\*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.**

**Section 1. APPLICANT**

Applicant/Business Name: LAKEWOOD WATER DISTRICT	Phone No: 253-588-4423	Other No:
Address: 11900 GRAVELLY LAKE DRIVE SW		
City: LAKEWOOD	State: WA	Zip: 98496
Email Address (optional): rmbblack@lakewood-water-dist.org		

Contact Name (if different from above): THOMAS M. PORS	Phone No: 206-357-8570	Other No:
Relationship to Applicant: ATTORNEY		
Address: 1700 7 <sup>TH</sup> AVENUE, SUITE 2100		
City: SEATTLE	State: WA	Zip: 98107
Email Address (optional):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: AREA SERVED BY LAKEWOOD WATER DISTRICT AND ITS WHOLESALE CUSTOMERS	Phone No:	Other No:
Address:		
City:	State:	Zip:
Email Address (optional):		

**Section 2. STATEMENT OF INTENT**

Briefly describe the purpose of your proposed project: DEVELOP ADDITIONAL WATER SUPPLY AND WELLS TO MEET FUTURE WATER DEMANDS FOR THE DISTRICT'S RETAIL AND WHOLESALE CUSTOMERS

Anticipated length of time to complete your project: 20 YEARS

**Water Use** List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input type="checkbox"/> Cubic Feet per Second (CFS) <input checked="" type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
MUNICIPAL SUPPLY	2,200	3,550	CONTINUOUS

For Ecology Use	APPLICATION NO: <u>G2-30571</u>	SEPA: Exempt/Not Exempt		
	Fee Paid: <u>x</u> <u>ADPL fee 484<sup>00</sup> Due</u>	ECY Coding: 001-001-WR1-0285-000011		
Date Returned	By	Priority Date <u>4-1-11</u>	By <u>SC</u>	WRIA: <u>12</u>



TOTAL:			

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: \_\_\_\_/\_\_\_\_/\_\_\_\_ TO: \_\_\_\_/\_\_\_\_/\_\_\_\_

Section 3. POINT OF DIVERSION OR WITHDRAWAL  
(Complete A or B, and C below)

<b>A.) If Surface Water Source</b> <input type="checkbox"/> Spring <input type="checkbox"/> Creek <input type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____ Source Name: _____ Tributary to: _____ Number of proposed diversion points: _____ Do you have an existing diversion? <input type="checkbox"/> YES <input type="checkbox"/> NO	<b>B.) If Ground Water Source</b> <input checked="" type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____ ABITIBI WELLS 4 & 5 Well diameter & depth: #4-16"x744', #5-20"x870' Number of proposed points of withdrawal: 1 or 2 Do you have an existing well? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If available, attach Water Well Report and pump test. Well Tag ID No. SEE ATTACHED WELL LOGS
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**C.) Point of Diversion/Withdrawal – Legal Description**

Parcel No.	¼	¼	Section	Township	Range	County
0220294002	SW	SE	29	20N	2E	PIERCE
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:  
\_\_\_\_\_ Feet (☐ North/☐ South) and \_\_\_\_\_ feet (☐ East/☐ West)  
from the (☐NW ☐SW ☐NE ☐SE ☐ \_\_\_\_\_ ) corner of Section\_\_\_\_.

Parcel No.	¼	¼	Section	Township	Range	County
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:  
\_\_\_\_\_ feet (☐ North/☐ South) and \_\_\_\_\_ feet (☐ East/☐ West)  
from the (☐NW ☐SW ☐NE ☐SE ☐ \_\_\_\_\_ ) corner of Section\_\_\_\_.

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☐ YES ☒ NO  
If no, do you have legal authority to make this application for use of another's land? ☒ YES ☐ NO  
Provide the owner name(s), address, and phone number: CHAMBERS CREEK, LLC, C/O RALSTON INVESTMENTS, 931 SW KING AVENUE, PORTLAND, OR 97205

For Ecology Use	APPLICATION NO: G 2-30671	SEPA: Exempt/Not Exempt
	Fee Paid: _____ Check No: _____	ECY Coding: 001-001-WR1-0285-000011
Date Returned _____	By _____	Priority Date _____ By _____ WRIA: _____



Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

RETAIL AND WHOLESALE WATER SERVICE AREA OF LAKEWOOD WATER DISTRICT AS SHOWN IN ITS MOST RECENTLY ADOPTED WATER SYSTEM PLAN (SEE ATTACHED MAP FROM THE 2006 WSP)

1/4	1/4	Section	Twp.	Range	County	Parcel No.
					PIERCE	

Do you own all the lands on which the proposed place of use is located? ☐ YES ☒ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: Permission secured from Ralston Investments, the owner.

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers: NUMEROUS WATER RIGHTS AS SHOWN IN THE ATTACHED SUMMARY SHEET.

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): STANDARD DEEP AQUIFER PRODUCTION WELLS WITH SUBMERISIBLE PUMPS – REFER TO SECTION 3 POINT OF DIVERSION OR WITHDRAWAL

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION

(Complete A or B, and C below)

<b>A.) Domestic Water Systems only</b>	<b>B.) Municipal Water Systems only</b> <i>(defined under RCW 90.03.015)</i>
Projected number of connections to be served: _____	Present population to be served water: <u>79,200 RETAIL &amp; WHOLESALE</u>
Type of connections: _____ <i>(e.g., home, recreational cabin)</i>	Estimate future population to be served: <u>129,100 RETAIL &amp; WHOLESALE (20 year projection)</u> <u>167,800 RETAIL &amp; WHOLESALE (50 year projection)</u>
<b>C.) Water System Planning</b>	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>03/24/2006</u> Water System Number: <u>45550C</u>	
Name of water system: <u>LAKEWOOD WATER DISTRICT</u>	



Are you within the service area of an existing water system? ☐ YES ☒ NO

If yes, explain why you are unable to connect to the system: N/A

## Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES (Not Applicable)

### Irrigation

Total number of acres requested to be irrigated under this application = \_\_\_\_\_ ACRES

NOTE: Outline the area to be irrigated on your attached map.

### Stockwater

List number and kind of stock: \_\_\_\_\_

Is the proposed project for a dairy farm? ☐ YES ☐ NO

### Other Proposed Farm Uses

Describe all proposed uses: \_\_\_\_\_

### Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: \_\_\_\_\_

## Section 8. OTHER WATER USES

(Not Applicable)

### Hydropower

Indicate total feet of head \_\_\_\_\_ and proposed capacity in kilowatts: \_\_\_\_\_

Describe works: \_\_\_\_\_

Indicate all uses to which power is to be applied: \_\_\_\_\_

FERC License No: \_\_\_\_\_

### Mining/Industrial Use

Describe use, method of supplying and utilizing water: \_\_\_\_\_

### Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☐ YES ☒ NO

Are you proposing to store more than 10 acre-feet of water? ☐ YES ☐ NO

Will the water depth be 10 feet or more? ☐ YES ☐ NO

If you answered yes to any of the above questions, please describe:

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: FROM I-5: GO WEST ON BRIDGEPORT WAY TO CHAMBERS CREEK ROAD IN UNIVERSITY PLACE, THEN WEST ON CHAMBERS CREEK ROAD W. TO THE SITE

Site Address: 4302 CHAMBERS CREEK ROAD, STEILACOOM, WA

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

RANDALL M. BLACK  
Print Name  
GENERAL MANAGER  
LAKEWOOD WATER DISTRICT  
(Applicant or authorized representative)

Signature

3/31/2011  
Date

N/A  
Print Name  
(Legal Owner or Part Owner Place of Use)

Signature

Date

N/A  
Print Name  
(Legal Owner or Part Owner Place of Use)

Signature

Date

Please check the region in which the project is located:

<b>*Submit your application to:</b>  DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 <sup>th</sup> Avenue SE Bellevue, WA 98008-5452	<input checked="" type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775